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APPLICANTS

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**\*\* CONTINUING DATA \*\*\*\*\***  
 This appln claims benefit of 60/269,817 02/20/2001

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **\*\* SMALL ENTITY \*\***  
**\*\* 03/18/2002**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <u>56</u> Examiner's Signature Initials	STATE OR  COUNTRY NY	SHEETS  DRAWING 58	TOTAL  CLAIMS 100	INDEPENDENT  CLAIMS 1
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TITLE  
 Electromagnetic interference immune tissue invasive system

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